

## **MEDICAID PHARMACY CONSOLIDATION MCO TECHNICAL ADVISORY COMMITTEE MEETING MINUTES FROM December 12, 2007**

- I. Welcome and Introductions:** The meeting was convened at 10am. Comments on or changes to the minutes should be sent to Rich Albertoni.
- II. Questions Received since 11/28/07 Meeting:** Rich Albertoni reviewed a list of questions submitted by the HMOs and the Department's responses to these questions. The Q&A are included as Attachment 1.

Allan Mailloux of APS Healthcare provided an update on the Department's lock-in program. The existing program operates on a monthly batch basis, reviewing both FFS and managed care claims, using an algorithm to select candidates for lock-in. The program also accepts referrals.

The HMOs expressed their concerns about the existing lock-in process. The HMOs also lock-in the patient's provider so that they can prevent prescriptions from other prescribers. The HMOs are concerned that lock-in won't be as effective if only locking-in the pharmacy. The FFS system does not have that capability and asks the pharmacy to use their best judgment about filling a script from a non-lock-in prescriber.

HMOs will be able to continue to communicate with pharmacies regarding how tight they would like lock-in to be for any given patient. The HMOs are concerned that when their payer relationship with the pharmacies is severed that they will not have good compliance from them. HMOs would like the pharmacies to coordinate with HMO care managers and would like DHFS support.

- III. Data Exchanges:** Kimberly Smithers reviewed the pharmacy data extract handout with the HMOs. She described to them the availability of an existing week to date file. In this file, a week is defined as Saturday through Friday. The file continues to refresh with the next day's data throughout the week, then starts over with the new week. Kimberly will send an email to the group describing the week to date file so that the HMOs can provide feedback.

DHFS requested medical claims data from the HMOs in order to support Prospective and Retrospective DUR functions. The Department's goal is to be able to maintain real-time Prospective DUR and monthly Retrospective DUR. Right now the frequency of encounter data reported to the Department varies by HMO. Currently, FFS updates medical profiles weekly to support Prospective DUR functions. The Department is not planning for a February 1, 2008 implementation.

- IV. Continuity of Care:** Rita Hallett reviewed the initial draft pharmacy related drug supplies list. She asked the group to review the list and return comments to Rich Albertoni. Immediate comments were for the addition of peak-flow meters and nebulizer machines.

Members transitioning from managed care will have a 60 day transition period, during which PA requirements will be suspended.

Regarding Prilosec OTC, which is covered by many HMOs but not currently by FFS, the Department will place the drug on file as non-preferred. As such, claims for managed care members will bypass the PDL edit for the 60 day transition period. Prilosec OTC will be on the agenda at the PA Committee meeting on February 6, 2008. Decisions from this meeting will be effective April 2, 2008, which coincides with the ending of the consolidation transition period.

Grandfathering of mental health drugs will allow the indefinite bypassing of PA requirements for members who are already stabilized on a mental health drug. Medicaid needs from the HMOs the members on non-preferred mental health drugs by SSN and NDC to put them on the exemption list. Medicaid would like to look back to June 2007. The first file should be sent to Medicaid by January 4, 2008. A second file re-fresh should be sent to Medicaid in February 2008. Medicaid will define a list of non-preferred drugs for which the HMO should send the requested information. This information will be sent to the HMOs via an email.

The pharmacy page on the DHFS website includes information on diagnosis-restricted drugs and other coverage policies. The SeniorCare drug search tool also allows prescribers to query by NDC or label name. The PDL list is not a complete list of covered drugs under Medicaid FFS. The PDL list addresses only those therapeutic classes that have been reviewed. Many classes of drugs have not been subject to PDL review. The first assumption regarding these drugs is that they are covered.

- V. Communications:** Claire Smith updated the committee regarding the status of various communications. The pharmacy and prescriber letters will be mailed next week. The provider and member update are scheduled to be mailed January 14, 2008. The committee suggested translations of the member update. The committee also suggested 24-hour staffing of the member and provider call lines during the transition. Staff asked if the HMOs could provide estimates of pharmacy-related calls from members and providers.

- VI. Next Meeting:** The next meeting of the Medicaid Pharmacy Consolidation MCO Technical Advisory Committee is scheduled for Wednesday, January 9, 2008, from 10 am-12 pm at 1 W Wilson Street Room 751. The group will also meet on Wednesday, January 23, 2008 at 1 W Wilson St, from 10am to noon.